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PTO/SB/22 (10-07)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2007 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 80169(302730)																									
Application Number 10/537,094-Conf. #2106		Filed June 2, 2005																									
For GERM-RESPONSIVE PROMOTER																											
Art Unit 1636		Examiner GUZO, David																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="0" style="width:100%"><thead><tr><th></th><th style="text-align:center"><u>Fee</u></th><th colspan="2" style="text-align:center"><u>Small Entity Fee</u></th></tr></thead><tbody><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align:right">\$120</td><td style="text-align:right">\$60</td><td style="text-align:right">\$ 120.00</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align:right">\$460</td><td style="text-align:right">\$230</td><td style="text-align:right">\$</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align:right">\$1050</td><td style="text-align:right">\$525</td><td style="text-align:right">\$</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align:right">\$1640</td><td style="text-align:right">\$820</td><td style="text-align:right">\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align:right">\$2230</td><td style="text-align:right">\$1115</td><td style="text-align:right">\$</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1105. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number 42,266</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p> <div style="display:flex; justify-content:space-between; margin-top:20px"><div style="width:45%; text-align:center"> _____ Signature James E. Armstrong, IV Typed or printed name</div><div style="width:45%; text-align:center"> _____ Date December 10, 2007 _____ (202) 478-7370 Telephone Number</div></div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small></p> <p><input type="checkbox"/> Total of 1 forms are submitted.</p>					<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$
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